



Extension of Expiration Application

Louisville Metro Planning & Design Services

Case No.: _____ Intake Staff: _____

Date: _____ Fee: **\$ 240**

Checklist:

- ☐ Detailed letter explaining the reason for request (please include case number)
- ☐ \$240 application fee (cash, charge or check made payable to Louisville Metro Codes & Regulations)

Project Information:

Project Name: _____

Primary Project Address: _____

Additional Address(es): _____

Primary Parcel ID: _____

Additional Parcel ID(s): _____

Has the property been the subject of a previous development proposal (e.g., rezoning, variance, appeal, conditional use permit, minor plat, etc.)? *This information can be found in the Land Development Report (Related Cases).* ☐ Yes ☐ No

If yes, please list the docket/case numbers:

Docket/Case #: _____ Docket/Case #: _____

Docket/Case #: _____ Docket/Case #: _____

Owner ☐ *Check if primary contact*

Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____

Alternate Phone: _____

Email: _____

Applicant/Professional ☐ *Check if primary contact*

Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____

Alternate Phone: _____

Email: _____

Owner Signature (required): _____